Debtor(s):			According to the calculations required by this statement:				
			The presumption arises.				
Case	No. (if k	known):	The presumption does not arise.				
			(Check the box as directed in Parts	I, III, and VI of this	s statement.)		
		STATEMENT OF CURRENT MONTHLY	INCOME AND MEANS TEST C	ALCULATION			
		FOR USE II	N <u>CHAPTER 7</u> ONLY				
		o Schedule I and J, this statement must be completed rimarily consumer debts. Joint debtors may complete or		ther or not filing jo	ointly, whose		
~~~~	······	Part I. EXCLUSION	FOR DISABLED VETERANS		~~~~~~~		
1	If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).						
		Part II. CALCULATION OF MONTH	HLY INCOME FOR § 707(b)(7) EXCL	LUSION	***************************************		
2	<ul> <li>Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.</li> <li>a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.</li> <li>b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income for Lines 3-11.</li> <li>c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</li> <li>d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</li> <li>All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the</li> </ul>						
	total b	filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.			Spouse's Income		
3	Gross wages, salary, tips, bonuses, overtime, commissions.			\$	\$		
	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) on Line 4. Do not enter a number less than zero.  Do not include any part of the business expenses entered on Line b as a deduction in Part V.						
4	a.	Gross receipts	\$	ļ			
	b.	Ordinary and necessary business expenses	\$				
	c.	Business income	Subtract Line b from Line a	\$	\$		
	Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.						
5	a.	Gross receipts	\$				
	b.	Ordinary and necessary operating expenses	\$	l l			
	c.	Rental income	Subtract Line b from Line a	\$	\$		
6	Interest, dividends and royalties.			\$	\$		
7	Pension and retirement income.			\$	\$		
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child or spousal support.  Do not include amounts paid by the debtor's spouse if Column B is completed.			\$	\$		

9	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below.					
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor: \$		Spouse: \$	\$	\$
10	Income from all other sources. If necessary, list additional sources on a separate page. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount.					
	a.			\$		
	b.			\$		
			Т	otal and enter on Line 10	\$	\$
11	Subtotal of Current Monthly Income for § 7 Column B is completed, add Lines 3 thru 10 in				\$	\$
12					\$	
	Part III. AF	PPLICATION OF		o)(7) EXCLUSION		
13					nber 12 and	\$
14	Applicable Median Family Income. Enter the median family income for the applicable state and hous size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankrup					
	a. Enter debtor's state of residence:		b. Ent	er debtor's household size:	re: \$	
	Application of Section 707 (b)(7). Check the	e applicable box and	d proce	ed as directed.		
The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presump arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII.				tion does not		
	The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.					
	* Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)*					
	Part IV. CALCULATIO	N OF CURRENT I	MONTI	HLY INCOME FOR § 70	7(b)(2)	
16	Enter the amount from Line 12.					\$
17	Marital Adjustment. If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. If you did not check the box at Line 2.c, enter zero.				\$	
18	Current Monthly Income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.				\$	
~~~~~	Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)					
Subpart A. Deductions under Standards of the Internal Revenue Service (IRS)						
19	National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)			\$		
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and					\$

20B	Loca IRS H www. Paym result				
	a.	IRS Housing and Utilities Standards; Mortgage/Rental Expense	\$		
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$		
	C.	Net mortgage/rental expense	Subtract Line b from Line a.	\$	
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:				
22	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. O 1 2 or more Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
23	Loca which two v Enter at w Paym result				
	a.	IRS Transportation Standards, Ownership Costs, First Car	\$		
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$		
	C.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	
24	check Enter (avail Avera and e				
	a.	IRS Transportation Standards, Ownership Costs, Second Car	\$		
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$		
	C.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.			\$	
26	Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.			\$	
27	Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.			\$	

28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44.			\$		
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.					
30		Necessary Expenses: childcare. Enter the average monthly amount that are – such as baby-sitting, day care, nursery and preschool. Do not incluents.		\$		
31	health	Necessary Expenses: health care. Enter the average monthly amount the care expenses that are not reimbursed by insurance or paid by a health same for health insurance or health savings accounts listed in Line 34.		\$		
32	Other Necessary Expenses: telecommunication services. Enter the average monthly expenses that you actually pay for telecommunication services other than your basic home telephone service – such as cell phones, pagers, call waiting, caller id, special long distance, or internet service – to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.			\$		
33	Total	Expenses Allowed under IRS Standards. Enter the total of Lines 19 thru	32.	\$		
	······	Subpart B. Additional Expense Deductions Note: Do not include any expenses that you have				
	Health Insurance, Disability Insurance and Health Savings Account Expenses. List and total the average monthly amounts that you actually pay for yourself, your spouse, or your dependents in the following categories.					
	a.	Health Insurance	\$			
34	b.	Disability Insurance	\$			
	C.	Health Savings Account	\$			
			Total: Add Lines a, b and c	\$		
35	Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.					
36	Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			\$		
37	Home energy costs. Enter the average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.					
38	Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$125 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.					
39	Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.			\$		
40				\$		
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40			\$		

~~~~		·····	Subpart C. Deductions for Debt Paymo	ent **********		
	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of insurance and taxes required by the mortgage. If necessary, list additional entries on a separate page.					
42		Name of Creditor Property Securing the Debt 60-month Average Payme		th Average Payment		
	a.			\$		
	b.			\$		
	C.			\$		
				Total: Ad	dd Lines a, b and c	\$
	residence may to the any	dence, a motor vehicle, or of include in your deduction 1, e payments listed in Line 42 sums in default that must be	laims. If any of the debts listed in Line 42 are secured ther property necessary for your support or the support /60th of any amount (the "cure amount") that you must a, in order to maintain possession of the property. The paid in order to avoid repossession or foreclosure. Lift necessary, list additional entries on a separate page.	of your d pay the c cure amo	ependents, you reditor in addition bunt would include	
43		Name of Creditor	Property Securing the Debt in Default	1/60th	of the Cure Amount	
	a.			\$		
	b.	b. \$				
	c.			\$		
				Total: Ad	dd Lines a, b and c	\$
44	Payments on priority claims. Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.				\$	
	Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.					
45	a.	Projected average monthly	Chapter 13 plan payment		\$	
	b.	b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) X				
	C.	Average monthly administra	ative expense of Chapter 13 case	Total: Mu	Itiply Lines a and b	\$
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.				\$	
·····	·····		Subpart D. Total Deductions Allowed under §			·····
47	7 Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.					\$
^~~~	·····	P	ART VI. DETERMINATION OF § 707(b)(2) PRE	SUMPT	ION	······
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))			\$		
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))				\$	
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.				\$	
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.				\$	

Form	B22A (10/06) UNIT	ED STATES BANKRUPTCY COURT - DISTRICT O	F HAWAII	Page 6			
	Initial presumption determination. Chec	ck the applicable box and proceed as direct	ted.				
52	The amount on Line 51 is less than \$6,000. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.						
	The amount set forth on Line 51 is more than \$10,000. Check the box for "The presumption arises" at the to statement and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainders						
	The amount on Line 51 is at least \$6,000, but not more than \$10,000. Complete the remainder of Part VI (Lines 53 thru 55).						
53	Enter the amount of your total non-priority unsecured debt			\$			
54	Threshold debt payment amount. Multip	ply the amount in Line 53 by the number 0.2	25 and enter the result	\$			
	Secondary presumption determination.	Check the applicable box and proceed as	directed.				
55	The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.						
	The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.						
~~~	Part VII: ADDITIONAL EXPENSE CLAIMS						
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.						
56	Expen	se Description	Monthly Amount				
	a.		\$				
	b.		\$				
	c.		\$				
		\$					
~~~	<b>.</b>	Part VIII. VERIFICATION					
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.)						
57	Date:	/s/					
01	Date: /s/ Signature of Debtor						
	Date: /s/_ Signature of Joint Debtor, if any						